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Substitute for form 1449/PTO	Complete if Known				
	Application Number	Continuation			
INFORMATION DISCLOSURE	Filing Date	09/16/2003			
	First Named Inventor	Olexa, C			
STATEMENT BY APPLICANT	Art Unit	744/			
	Examiner Name	MISSE			
Sheet 1 of 1	Attorney Docket Number	NetRoster-0200-C			

C. constant	T 0"			DOCUMENTS	
Examiner Initials*	Cite No.¹	Document Number Number-Kind Code ^{2 (# known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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